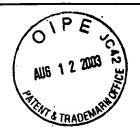
ss if displays a valid OMB control number.

PETITION FOR EXTENSION

Docket No. (Optional)



Under the Paperwork Reduction Act of

PETITION FOR EXTENSION	OF TIME UNDER	37 CFR 1.	.136(a)	39303	2014800		
OIPE	In re Application of Takao YAMAMOTO						
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Application Number			Filed			
AUG 1 2 2003 12	09/585,243			May 31, 2000			
AUG TRADEMINE	For: MUSICAL TONE GENERATION APPARATUS AND EXTENSION BOARD ENHANCING FUNCTIONSTHEREOF						
	Art Unit	2837	Examiner	aminer David S. V		n	
This is a request under the provisions identified application.	of 37 CFR 1.136(a) to	extend the p	eriod for filir	ng a reply in the	e above		
The requested extension and appropri	ate non-small-entity fe	e are as follo	ws (check t	ime period des	sired):		
One month (37 CFR 1.17(a)(1))			\$		_		
x Two months (37 CFR 1.17(a)(2))			\$	410.00	- -		
Three months (37 CFR 1.17(a)(3))			·	\$	<u> </u>	-	
Four months (37 CFR 1.17(a)(4))			\$	ECHN	_		
Five months (37 CFR 1.17(a)(5))			\$	2	2		

One month (37 CFR 1.17(a)(1)) X Two months (37 CFR 1.17(a)(2)) Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(5)) Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. X The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 03-1952 Fee Transmittal (PTO/SB/17) is herewith enclosed in duplicate. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). August 12, 2003 Date (213) 892-5630 Mehran Arjomand Typed or Printed Name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. Submit multiple forms if more than one signature is required. Submit multiple forms if more than one signature is required. Submit multiple forms if more than one signature is required. Submit multiple forms if more than one signature is required.	The requested extension and appropriate non-small-entity fee are as follows (check time period desired):						
Three months (37 CFR 1.17(a)(3)) Four months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(5)) Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. The Director is hereby authorized to charge fees which may be required, or credit any overpayment, to Deposit Account Number Fee Transmittal (PTO/SB/17) is herewith enclosed in duplicate. I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). attorney or agent of record. X attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). Signature (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	One month (37 CFR 1.17(a)(1))	\$					
Four months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(5)) \$ \$ \$ \$ \$ \$ \$ \$ \$	X Two months (37 CFR 1.17(a)(2))	\$	410.00	٠			
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	Three months (37 CFR 1.17(a)(3))	\$					
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	Four months (37 CFR 1.17(a)(4))	\$					
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	Five months (37 CFR 1.17(a)(5))	\$	- PG 8 5				
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more		ount shown	ex 6				
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	above is reduced by one-half, and the resulting fee is: \$		E ~	•			
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	A check in the amount of the fee is enclosed.		Tage Color	3			
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	Payment by credit card. Form PTO-2038 is attached.	į.					
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	The Director has already been authorized to charge fees in this application to a	a Deposit Acco	ount. 👸 🥆	\			
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	The Director is hereby authorized to charge any nees which may be required, o	or credit	0319				
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	any overpayment, to Deposit Account Number 03-1952		37	_			
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	Fee Transmittal (PTO/SB/17) is herewith enclosed in duplicate.		8 5	5			
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	I am the applicant/inventor.		000	5 2			
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more		/96).	EBREGI	r			
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	attorney or agent of record.		9				
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	x attorney or agent under 37 CFR 1.34(a).	_	72003	True I			
August 12, 2003 Date (213) 892-5630 Telephone Number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	Registration number if acting under 37 CFR 1.34(a) 48,281		3/14/ EC	3			
(213) 892-5630 Mehran Arjomand Telephone Number Typed or Printed Name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more		<u> </u>		Š			
Telephone Number Typed or Printed Name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	Date \ \Sig	nature .					
Telephone Number Typed or Printed Name NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more	(213) 892-5630 Mehran	Ariomand					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more							
	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are re-		tiple forms if more				

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL989010955US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: August 12, 2003

Total of

forms are submitted.

(Marco A. Jimenez)